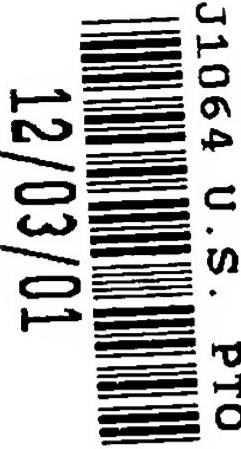


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12/03/01

J1064 U.S. PTO

Docket: 2678



12/03/01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Stephen Bresina

Examiner: Unknown Group Art Unit: Unknown

Serial No: To Be Assigned Filed: Concurrently Herewith

For: APPARATUS FOR FUSING ADJACENT BONE STRUCTURES

APPLICATION TRANSMITTAL LETTER

Asst. Commissioner For Patents  
Washington, D.C. 20231

Sir:

Transmitted herewith for filing is the [x] utility [ ] design patent application in this case including:

1. [ ] This application is a [ ] Continuation; [ ] Divisional [ ] Continuation in Part of prior application Serial No. \_\_\_\_\_ filed on \_\_\_\_\_ [entire genealogy should be set forth].
2. [ ] This application claims priority from Provisional Application No. \_\_\_\_\_, filed \_\_\_\_\_.
3. [x] The application consisting of 17 pages (including specification, claims and abstract).
4. [x] 10 sheet(s) of drawings is enclosed. The drawings are:
  - a. [ ] formal; or
  - b. [x] informal; formal drawings will be submitted in due course.
5. [x] A signed declaration and power of attorney is enclosed.
6. [ ] A declaration and power of attorney is not enclosed at this time since it has not been executed by the inventor(s). A signed declaration and power of attorney will be submitted in due course.

The inventor is: Stephen Bresina

7. [x] An Assignment of the invention to Surgical Dynamics, Inc. is enclosed. Please record the Assignment and return it to the undersigned. **TWO DUPLICATE COPIES OF THIS PAPER ARE ENCLOSED.**
8. [] Amend the specification such that the first line reads as follows:  
(entire genealogy should be set forth)
9. [x] The Application filing fee is calculated below.

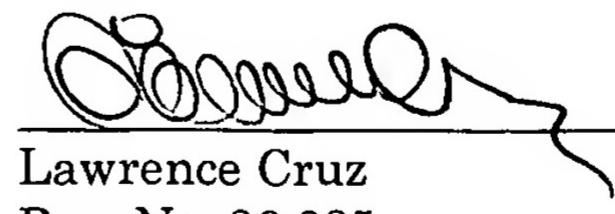
No. Filed	No. Extra*	Rate:	Fee
Basic Fee:			
Total Claims:	17 - 20 - 0 =	x 18.00	\$ 740.00
Indep Claims:	2 - 3 - 0 =	x 84.00	\$ 0.00
[ ] Multiple Dependent Claims Presented	+ \$270.00		<u>\$ 0.00</u>

**TOTAL: \$740.00**

10. [x] Please charge Deposit Account No. 21-0550 in the amount of \$740.00 (which includes filing fee and recordation fee).  
**TWO DUPLICATE COPIES OF THIS PAPER ARE ENCLOSED.**
11. [x] The Commissioner is hereby authorized to charge any additional fees which may be required for this application, or credit any overpayment to Deposit Account No. 21-0550. **TWO DUPLICATE COPIES OF THIS SHEET ARE ENCLOSED.**

Respectfully submitted,

Date: 03 Dec 2001

  
\_\_\_\_\_  
Lawrence Cruz  
Reg. No. 36,385  
Attorney for Applicant

United States Surgical, a division of  
TYCO HEALTHCARE GROUP LP  
150 Glover Avenue  
Norwalk, Connecticut 06856  
(203) 845-4562

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

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**CERTIFICATE OF EXPRESS MAILING**

"Express Mail" Mailing Label No.: EJ7671941488US

Date of Deposit: Dec. 3, 2001

I hereby certify that the following:

- This Certificate of Express Mailing
- Application Transmittal letter
- A patent application consisting of 17 pages of abstract, specification and claims
- Declaration and Power of Attorney for patent application  executed  unexecuted
- 10 sheets of  formal  informal drawings
- Assignment Recordation Sheet
- Assignment
- Return postcard

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR Section 1.10 on the Date of Deposit indicated above in an envelope addressed to the Asst. Commissioner for Patents, Washington, D.C. 20231.

Vanessa Mastri  
Vanessa Mastri

United States Surgical, a division of  
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(203) 845-1172

TYCO HEALTHCARE GROUP LP